



Environmental Justice Petition Signature Page

(Please copy as needed)

Signature	Print Name & Address	Worker or Resident
EXAMPLE: <i>Jane Doe</i>	Jane Doe 123 Community Ave., Newark, NJ 07102	<input type="checkbox"/> Worker <input type="checkbox"/> Resident
1.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
2.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
3.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
4.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
5.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
6.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
7.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
8.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
9.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
10.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
11.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
12.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
13.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
14.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident

15.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
16.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
17.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
18.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
19.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
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21.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
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25.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
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27.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
28.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
29.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
30.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
31.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
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33.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
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40.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
41.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
42.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
43.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
44.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
45.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
46.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
47.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
48.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
49.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident
50.		<input type="checkbox"/> Worker <input type="checkbox"/> Resident